

| County-City | 1936 | | 1935 | |
|-----------------------------------|-------|-------|-------|-------|
| | No. | Rate | No. | Rate |
| Santa Clara County (exclusive of) | 71 | 55.0 | 91 | 70.9 |
| San Jose | 17 | 30.4 | 15 | 29.0 |
| Palo Alto | 6 | 23.7 | 7 | 27.2 |
| Santa Clara | --- | --- | 1 | 47.6 |
| Santa Cruz County (exclusive of) | 7 | 54.3 | 5 | 37.0 |
| Santa Cruz | 8 | 41.9 | 6 | 35.7 |
| Watsonville | 13 | 57.5 | 16 | 72.4 |
| Shasta | 14 | 49.6 | 14 | 55.1 |
| Sierra | 1 | 38.5 | 2 | 57.1 |
| Siskiyou | 23 | 62.2 | 18 | 52.8 |
| Solano County (exclusive of) | 8 | 42.8 | 10 | 52.3 |
| Vallejo | 9 | 35.6 | 11 | 49.5 |
| Sonoma County (exclusive of) | 14 | 37.8 | 19 | 55.9 |
| Petaluma | 3 | 19.6 | 3 | 20.8 |
| Santa Rosa | 8 | 36.2 | 7 | 35.2 |
| Stanislaus County (exclusive of) | 20 | 40.5 | 20 | 40.1 |
| Modesto | 25 | 39.9 | 31 | 55.6 |
| Sutter | 9 | 33.0 | 18 | 65.0 |
| Tehama | 9 | 42.2 | 7 | 31.2 |
| Trinity | 3 | 75.0 | 2 | 43.5 |
| Tulare County (exclusive of) | 82 | 67.8 | 83 | 74.0 |
| Visalia | 5 | 25.1 | 8 | 42.5 |
| Porterville | 9 | 65.7 | 10 | 68.5 |
| Tulare | 13 | 112.1 | 10 | 91.7 |
| Tuolumne | 5 | 44.2 | 8 | 75.5 |
| Ventura County (exclusive of) | 56 | 103.9 | 48 | 92.1 |
| Oxnard | 20 | 84.7 | 20 | 77.5 |
| Santa Paula | 5 | 34.7 | 5 | 39.1 |
| San Buenaventura | 9 | 43.5 | 3 | 19.5 |
| Yolo County (exclusive of) | 13 | 89.6 | 10 | 62.5 |
| Woodland | 10 | 60.3 | 3 | 20.3 |
| Yuba County (exclusive of) | 3 | 90.9 | 2 | 41.7 |
| Marysville | 13 | 73.4 | 11 | 84.6 |
| Rates by Race | | | | |
| Total | 4,478 | 53.0 | 3,973 | 49.5 |
| White | 2,834 | 41.5 | 2,546 | 39.5 |
| Negro | 67 | 51.3 | 78 | 62.5 |
| Indian | 59 | 137.5 | 44 | 109.7 |
| Chinese | 36 | 67.0 | 22 | 42.5 |
| Japanese | 52 | 35.9 | 65 | 43.3 |
| Mexican | 1,379 | 113.4 | 1,184 | 100.7 |
| Other | 51 | 141.8 | 34 | 115.2 |

| | | | | |
|-------------------------------------|-------|-------|-------|-------|
| Infant Mortality by Counties | | | | |
| CALIFORNIA | 4,478 | 53.0 | 3,973 | 49.5 |
| Alameda | 254 | 42.8 | 230 | 39.8 |
| Alpine | --- | --- | --- | --- |
| Amador | 1 | 15.1 | 2 | 26.0 |
| Butte | 34 | 55.8 | 32 | 52.8 |
| Calaveras | 2 | 33.3 | --- | --- |
| Colusa | 9 | 55.2 | 10 | 61.0 |
| Contra Costa | 42 | 44.7 | 52 | 51.4 |
| Del Norte | 3 | 56.6 | 2 | 27.4 |
| El Dorado | 5 | 33.1 | 3 | 28.3 |
| Fresno | 189 | 73.5 | 130 | 52.1 |
| Glenn | 5 | 37.9 | 8 | 52.6 |
| Humboldt | 36 | 52.3 | 31 | 48.8 |
| Imperial | 160 | 120.6 | 142 | 105.3 |
| Inyo | 5 | 56.8 | 7 | 106.1 |
| Kern | 170 | 86.3 | 140 | 85.1 |
| Kings | 63 | 109.2 | 46 | 88.5 |
| Lake | 5 | 59.5 | 2 | 24.4 |
| Lassen | 21 | 84.3 | 13 | 56.3 |
| Los Angeles | 1,457 | 45.5 | 1,312 | 43.6 |
| Madera | 41 | 127.3 | 29 | 105.4 |
| Marin | 8 | 26.3 | 7 | 25.5 |
| Mariposa | 4 | 125.0 | 2 | 60.6 |
| Mendocino | 28 | 85.4 | 11 | 35.2 |
| Merced | 50 | 72.5 | 41 | 60.6 |
| Modoc | 14 | 157.3 | 8 | 88.9 |
| Mono | 3 | 333.3 | 1 | 142.8 |
| Monterey | 56 | 59.8 | 51 | 56.2 |
| Napa | 10 | 34.8 | 8 | 33.5 |
| Nevada | 11 | 44.7 | 19 | 84.4 |
| Orange | 112 | 57.0 | 125 | 66.4 |
| Placer | 15 | 58.6 | 14 | 54.9 |
| Plumas | 4 | 30.8 | 2 | 21.5 |
| Riverside | 142 | 86.2 | 99 | 61.1 |
| Sacramento | 129 | 58.1 | 110 | 51.2 |
| San Benito | 10 | 71.4 | 14 | 107.7 |
| San Bernardino | 199 | 76.1 | 142 | 57.9 |
| San Diego | 168 | 43.2 | 142 | 40.0 |
| San Francisco | 303 | 41.6 | 251 | 35.2 |
| San Joaquin | 84 | 51.0 | 105 | 66.4 |
| San Luis Obispo | 17 | 36.5 | 29 | 66.5 |
| San Mateo | 30 | 53.3 | 18 | 32.3 |
| Santa Barbara | 68 | 60.9 | 59 | 53.2 |
| Santa Clara | 94 | 44.5 | 114 | 56.2 |
| Santa Cruz | 28 | 51.3 | 27 | 51.5 |
| Shasta | 14 | 49.6 | 14 | 55.1 |
| Sierra | 1 | 38.5 | 2 | 57.1 |
| Siskiyou | 23 | 62.2 | 18 | 52.8 |
| Solano | 17 | 38.6 | 21 | 50.8 |
| Sonoma | 25 | 33.6 | 29 | 42.4 |
| Stanislaus | 45 | 40.2 | 51 | 48.3 |
| Sutter | 9 | 33.0 | 18 | 65.0 |
| Tehama | 9 | 42.2 | 7 | 31.2 |
| Trinity | 3 | 75.0 | 2 | 43.5 |
| Tulare | 109 | 65.6 | 111 | 71.0 |
| Tuolumne | 5 | 44.2 | 8 | 75.5 |
| Ventura | 90 | 79.9 | 76 | 71.6 |
| Yolo | 23 | 73.9 | 13 | 42.2 |
| Yuba | 16 | 76.2 | 13 | 73.0 |

PUBLIC HEALTH ADMINISTRATION IN COUNTIES AND CITIES OF CALIFORNIA

The California State Department of Public Health regards the county as the logical local unit in public health administration. To be sure, the large city is a suitable unit for administrative purposes in a metropolitan area, but the county, because of its governmental status, must be regarded as the proper unit for general public health administration.

The Political Code makes provision for the appointment in each county by the board of supervisors of a health officer who shall be a graduate of a medical college of good standing and repute. He is charged with the enforcement and observance of all orders and ordinances of the board of supervisors pertaining to health and sanitary matters, all orders, quarantine regulations and rules prescribed by the State Board of Health, all statutes relating to the public health and to vital statistics.

The Political Code also makes provision for the appointment by city board of trustees, city council, or other municipal legislative body of a city health officer whose duty it is to enforce and observe all local ordinances pertaining to health and sanitary matters, all orders, quarantine regulations and rules prescribed by the State Board of Health and all statutes relating to the public health and to vital statistics. City and county health officers are required to report to the State Board of Health the sanitary condition of the locality, the number of deaths with the cause of each and the presence of epidemics or other dangerous, contagious or infectious diseases and such other matters within their knowledge or jurisdiction as the State Board may require.

A statute enacted in 1917 provides for the establishment of local health districts which may cover incorporated or unincorporated territory or both, containing one or more counties. Such district is supported through a tax levy. Only one county of California has so far made use of the organization provided in this statute.

During the past twenty years great impetus has been given to the organization of full-time county health units. The State Board of Public Health has been active in stimulating the organization of such units. At the present time there are twenty-one full-time county health units operating in California including San Francisco, which is organized as a city and county and has no area which may be considered as rural. The following are the rural county health units operating upon a full-time basis together with the year in which such units were established:

| | |
|-----------------|------|
| Los Angeles | 1915 |
| Orange | 1922 |
| Monterey | 1923 |
| San Joaquin | 1923 |
| San Luis Obispo | 1923 |
| San Diego | 1924 |
| Santa Barbara | 1925 |
| Riverside | 1926 |
| Contra Costa | 1928 |
| Madera | 1928 |
| Stanislaus | 1929 |
| Imperial | 1930 |
| San Bernardino | 1931 |
| Kern | 1931 |
| Alameda | 1933 |
| San Mateo | 1933 |
| Fresno | 1935 |
| Ventura | 1937 |
| *Yolo | 1937 |
| Santa Cruz | 1937 |

* A full-time unit was first established in Yolo County in 1927, but it reverted to a part-time basis after operating three or four years, only to be reestablished in 1937.

Of these, nine counties—Contra Costa, Madera, Monterey, Orange, San Luis Obispo, Santa Barbara, Stanislaus, San Bernardino, and Yolo—received subsidies from the State through the State Board of Public Health, the International Health Board, or the United States Public Health Service during the early periods of their existence. It was customary for the State to provide public health nursing service and for the International Health Board or the Public Health Service to pay portions of the health officer's salary. After three years of such subventions assistance was withdrawn, it being assumed that at the end of that time the demonstration had been completed and that the county would be able to carry on the activities without further assistance. The wisdom of this course is revealed

in the fact that full-time units continued in all of these counties with the exception of Yolo, which has been on a part-time basis for several years but is once more operating with full-time facilities.

CALIFORNIA CITIES HAVING FULL-TIME PUBLIC HEALTH SERVICE

At present the following cities of California have health departments, not included with county units, whose staff members are employed full time:

| City | Population 1930 Census |
|---------------------|---------------------------|
| Los Angeles | 1,254,179 |
| Long Beach | 144,140 |
| Oakland | 285,717 |
| Pasadena | 76,836 |
| San Jose | 58,090 |
| Palo Alto | 13,841 |
| Sacramento | 94,429 |
| San Francisco | 637,509 |
| Berkeley | 82,745 |
| Santa Barbara | 33,959 |
| Total | 2,681,445 |

NEW CALIFORNIA PUBLIC HEALTH LAWS

The chapter titles and numbers in the California Codes, for public health laws passed at the last session of the Legislature, and which became operative on August 27, 1937, are as follows:

Chapter 787. Venereal Disease Control

This Act establishes a Bureau of Venereal Diseases in the State Department of Public Health. It requires the State Board of Public Health to make rules and regulations for the prevention and control of venereal diseases, and charges the Board with the enforcement of such rules and regulations, particularly those relating to the quarantine of persons suspected of having, or those who may have venereal disease. The Act enables the State Department of Public Health to establish, maintain and subsidize clinics, dispensaries and prophylactic stations for the diagnosis, treatment, and prevention of venereal diseases. Under its provisions the Department may furnish treatment for cases in rural districts where adequate facilities for such treatment are not available. Local health officers are required to exert every effort to learn of the existence of cases of infectious venereal diseases, to investigate all cases that are not subject to proper control measures, to ascertain so far as possible all sources of infection and to take reasonably necessary measures to prevent the transmission of infection.

Diseased persons are required to comply with all State rules and regulations and to give all information required by the Act, and must submit to approved examination to determine the condition of the disease in the individual patient. Patients who discontinue control measures required by the Act and who fail to comply with the requirements for treatment must be reported by the individual or organization providing such treatment. Violations of the Act constitute misdemeanors. It is specified that nothing in the Act shall be construed to interfere with the freedom of any adherent of a religious sect which depends upon prayer for healing, except that the rules and regulations pertaining to reporting and quarantine must be observed.

Chapter 804. Clinical Laboratories

This Act repeals Chapter 638, Statutes of 1935, and provides that after January 1, 1938, each clinical laboratory must be under the immediate supervision and direction of a licensed clinical laboratory technologist, or by the holder of an unrevoked physician's and surgeon's certificate. Every technologist making tests in bacteriology, biochemistry, serology and parasitology, must hold a certificate as a qualified technician in the subject or subjects concerned with the test, as issued by the State Board of Public Health. Definitions are established for clinical laboratory technologists and clinical laboratory technicians. It provides further that after January 1, 1938, all clinical laboratory technologists or technicians must have certificates issued by the State Board of Public Health. Clinical laboratories operated by nonprofit hospitals, by the State or Federal Government, are exempt from the provisions of the Act. Provision is made for the collection of fees from applicants for certificates, which are paid into a fund to be known as

the clinical laboratory fund. The State Board of Public Health is charged with making regulations for the conduct of the clinical laboratories and their enforcement.

Chapter 49. State Board of Public Health

This Act provides for the appointment of an eighth member of the State Board of Public Health, who should be a duly licensed and practicing dentist of this State.

Chapter 530. Sanitation of Trailer Coaches

This Act defines a trailer coach, trailer camp and camp site. It provides, further, for the issuance of permits to applicants who desire to operate or construct trailer camps. Such permits are issued by the Division of Immigration and Housing of the Department of Industrial Relations. Specific requirements are made to cover the following: caretaker, grading and drainage, cleanliness, water supply, sewage disposal, garbage and rubbish disposal, and other matters pertaining to general sanitation. The law provides, further, that no trailer coach shall park overnight within twenty feet of the traveled portions of a public highway. This section of the Act shall be enforced by the California Highway Patrol. The provisions of the Act do not apply to any supervised public park or camp ground owned or operated by the Federal Government, the State of California or any of its agencies, or by any political subdivision or municipality.

Chapter 882. Nonprofit Hospital

This Act adds sections to the Insurance Code, pertaining to nonprofit hospital service. In addition to certain requirements by the State Commissioner of Insurance, it is established that no nonprofit hospital service plan shall be operated by any corporation subject to the provisions of the Act, without first having obtained a certificate of approval from the State Department of Public Health. No such certificate can be issued until the applicant has established that the hospitals wherein subscribers to the service are to be hospitalized shall possess adequate physical facilities, mechanical equipment and personnel for care of patients. The department is authorized to make inspections of such hospital premises and receive payment of registration fees not to exceed twenty-five cents per bed, based upon the daily average number of beds, but in no event less than \$15 per hospital. The department is authorized to hold hearings in order to determine whether or not required hospital standards of service are maintained. Provision is also made for revoking certificates of approval for just cause. The State Commissioner of Insurance shall not issue his certificate of authority to establish or operate a nonprofit hospital service plan until certificates of approval have been issued by the State Department of Public Health.

Chapter 359. Food Sanitation

Under this Act, three new sections are added to the Food Sanitation Act of 1909. The first makes it unlawful to sell at retail jams, jellies, preserves, marmalades, peanut butter, horseradish, mayonnaise or salad dressings other than in closed containers approved by the State Board of Public Health. When any other disposition of such foods is conducive to contamination by flies, insects, dust, and dirt, except when sold in bulk for manufacturing products.

The second section makes illegal the use or sale of second-hand bottles, glass or crockery food containers used in the manufacture, production, or packing for sale of a food, drug, or liquor except by firms licensed by the California State Board of Public Health to sell such bottles. The Board shall require evidence that the applicant is properly equipped to sterilize such containers. It is specified that such container shall be cleaned and sterilized by soaking in a hot, caustic solution of not less than 120 degrees Fahrenheit, for a period of not less than five minutes and then thoroughly rinsed in pure water.

The third new section prohibits the use of food containers manufactured from second-hand tin plate, to be used for packing of hermetically sealed canned food products for human consumption, unless such plate has been cleansed and sterilized by being thoroughly immersed in the boiling water and then dried on hot rolls or by the use of heated air.

Chapter 609. Physical Examination of School Pupils

A new article is added to the School Code, by which the county superintendent of schools is authorized to employ nurses to supervise the health of pupils in the schools of